

ISSUE SLIP STAPLE AREA (for additional cross or errors)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.L.		12/12
O.P.E. CLASSIFIER			12-15-12
FORMALITY REVIEW		714/13	12-15-12
RESPONSE FORMALITY REVIEW		714/23	3-1-13

INDEX OF CLAIMS

✓ _____ Rejected U _____ Non-elected
 * _____ Allowed I _____ Interference
 - (Through numbers) _____ Canceled A _____ Appeal
 + _____ Restricted O _____ Objected

Claim	Date	Claim	Date	Claim	Date
1		1		1	
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If more than 150 claims or 10 actions
 staple additional sheet here
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